Screening for Colorectal Cancer: **Optimizing Quality**

Primary Care Version

Part 2




National Center for Chronic Disease Prevention and Health Promotion
Division of Cancer Prevention and Control

Step 1: Select an Effective Test

Not all FITs have been tested rigorously.

Criterion for choosing a FIT:

Use a FIT that has been evaluated in clinical practice and for which data on performance in the peer-reviewed literature show at least 50% sensitivity for cancer.

Step 1: Select an Effective Test

A recent systematic review compared results of studies on performance characteristics of different FITs.

Looked at studies done in average-risk asymptomatic patients with an appropriate reference standard (colonoscopy or ≥ 2 years of follow-up)

- Included several studies of Polymedco FITs, one study of Hemoccult ICT®,* and studies of FITs not available in U.S.
- For included studies:
  - Range of sensitivity for cancer: 56%–100%.**
  - Range of specificity for cancer: 83%–97%.**

  Excluding studies of FITs that have been discontinued.

*Use of trade names is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services

**Accuracy of Fecal Immunochemical Tests for Colorectal Cancer: Systematic Review and Meta-analysis

Step 1: Select an Effective Test

At this time, the brand of FIT that has been most extensively tested and is available in the United States is OC FIT-CHEK®* (Polymedco):

- Provided as a one-sample kit in most cases. The collection method involves inserting the probe several times into the stool to a point on the probe just above the ridges and placing the collection probe into a small tube. The stool is probed before it comes into contact with the toilet water.

- Test processing can be manual or automated
  - Manual: OC-Light®* – point-of-care assay
    - Estimated sensitivity for cancer: 93% (95% CI, 83%–97%)
  - Automated: OC-Auto®* – uses an automated analyzer

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